UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 6/6/05 2 Serial/Patent #10/518412					
3 Please refund the following fee(s):		4 PAI NUI	PER MBER	5 DATE FILED	6 AMOUNT
	Filing			14/7/05	\$ 100
	Amendment				\$ ·
	Extension of Time				\$
	Notice of Appeal/Appeal				\$
	Petition				\$
	Issue				\$
	Cert of Correction/Terminal Disc.				\$
	Maintenance				\$
	Assignment				\$
	Other				\$
		7 TOTAL AMOUNT OF REFUND \$ 100			
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
	Overpayment	V		redit Depo	osit A/C #:
	Duplicate Payment		9 /	40	1/2
	No Fee Due (Explanation):	L			
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: H JOHN SON TITLE: Parallyal					
SIGNATURE: (1) (4) (4) (1) PHONE: 308-9/40					
office:					
THIS SPACE RESERVED FOR FINANCE USE ONLY:					
APPROVED: DATE:					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

FORM PTO 1577 (01/90) Office of Finance Refund Branch Crystal Park One, Room 802B